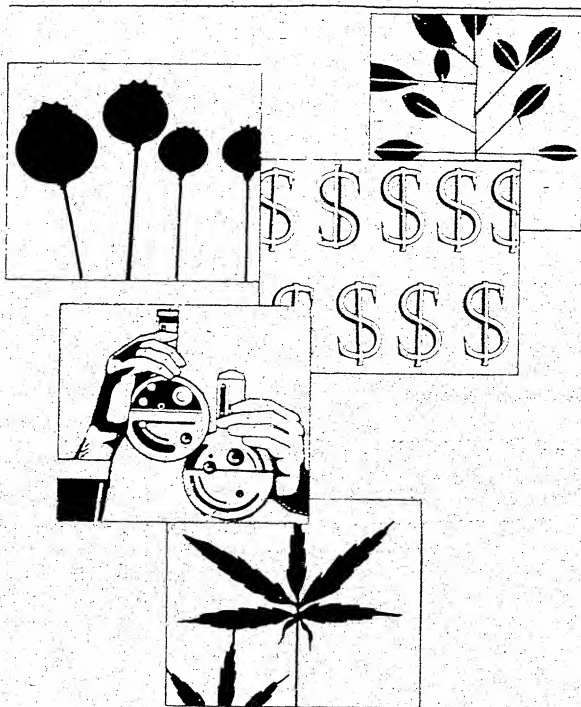


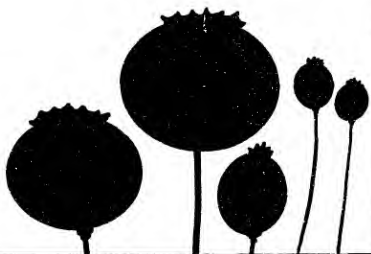
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# Narcotics Intelligence Estimate 1984

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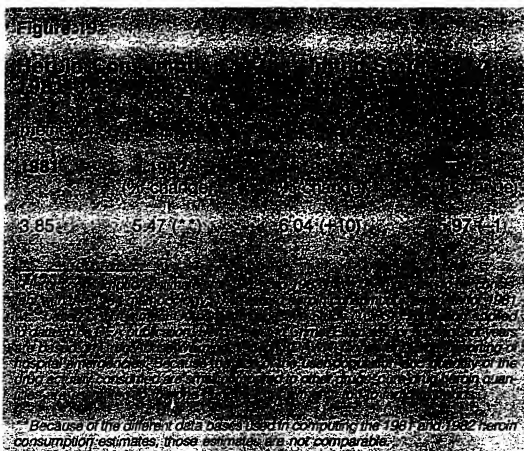


# Chapter: Four **OPIATES**



## Availability and Use in the United States

The number of heroin addicts/users in the United States in 1981 was estimated at 490,000. Although no later estimates have been made, heroin hospital emergencies in subsequent years suggest that the number of users increased between 1981 and 1983. The preponderance of heroin users since 1979 have not been first-time users, but long-time users or recidivists. There also have been some new initiates to heroin use; however, data from the national household surveys show that individuals who first started using heroin between 1979 and 1984 use it less frequently than those who began their heroin use in previous years. In the 1980's, heroin users, including new initiates, were older than their counterparts in the 1960's and 1970's. Based on year of first use data from treatment programs, an increasing proportion was white. It is estimated that in 1984 heroin users consumed about six metric tons, a stabilization after increases during recent years (see Figure 19).



Rates of change in heroin consumption during the past four years have been heavily influenced by regional changes in availability, as reflected by retail purity and price and by related trends in use. The heroin situation of the 1980's has reflected the impact of the three competing sources of supply. Heroin use and trafficking patterns generally vary between different geographic regions of the United States (see Figure 20), and sometimes within a region as well.

Overall trends in the Northeast have been influenced by the availability of Southwest Asian (SWA) and Southeast Asian (SEA) heroin. Most of the heroin in that region as well as in the Southeast was SWA in 1984. According to the DEA Heroin Signature Program,\* SWA heroin, primarily heroin refined along the Afghanistan/Pakistan border, accounted for 51 percent of the U.S. supply, a proportion comparable to that of the three previous years. The Signature Program indicates that only 17 percent of the U.S. heroin supply came from Southeast Asia in 1984; however, the large opium production in Southeast Asia and newly identified smuggling routes suggest that there may have been more SEA heroin available. This area remains the principal source of heroin for Canada. Trends in the West have been influenced by the supply of Mexican heroin, which in 1984 constituted 32 percent of the U.S. supply and had a higher purity at wholesale levels.

The connection between the supply and use can be seen by two regional increases in heroin use which occurred in the past six years, one in the Northeast and one in the West. The first, which started during 1979 in the Northeast corridor, resulted from an increase in SWA heroin. The second began during 1981 in southwest cities as a result of an increase in the availability of Mexican heroin. In addition, SEA heroin became more readily available between 1982 and 1984. By 1983-1984, heroin indicators for the Northeast had started to decline, while those reflecting heroin use in the West continued to increase. In 1984, the conflicting trends offset one another, together resulting in a slight decline at the national level.

The number of heroin/morphine-related hospital emergencies also varied by region. These emergencies rose significantly between 1980 and 1982, a period characterized by rapidly rising heroin availability, increasing retail purities, and lower prices. Since 1982, the rate of increase has been much less pronounced. During 1984, heroin/morphine-related hospital emergencies decreased 1 percent from 1983 levels (see Figure 21). New York City reported a 16 percent decrease. Detroit and Los Angeles also experienced declines, while Chicago, Miami, and Washington, D.C. showed increases. The number of heroin-related deaths reported in 1984 increased 31 percent; this increase occurred almost exclusively among that population which uses heroin in combination with other drugs. In addition, death data are weighted more heavily by trends in the West because of the absence of death data from New York City.

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\*Heroin signature chemical analysis identifies and quantifies selected heroin characteristics and secondary constituents. From the resultant data, heroin exhibits are classified according to the process by which they are manufactured, which in turn enables the association of exhibits with geographic regions.

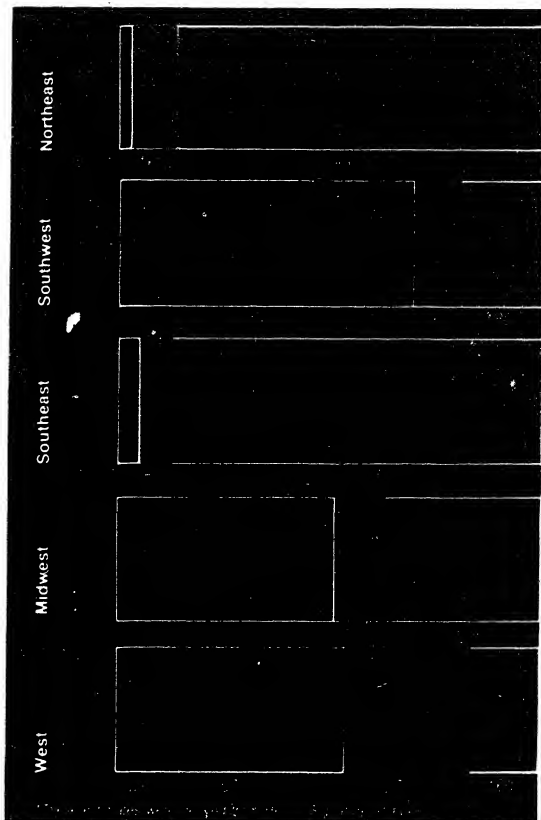
Figure 20

# Origin of Heroin Encountered in the United States by Geographic Area, 1984\*

Mexican: ●

Southeast Asian: ●

Southwest Asian: ●



The connection between intravenous heroin use and the contraction of AIDS is now clearly documented. Treatment officials in New York City and Newark reported large numbers of AIDS victims among heroin users in 1984, and projected that the numbers would increase substantially because of the large number of addicts who have been exposed and will most likely develop symptoms after the incubation period. This is a concern in other states as well.

Approximately 79 percent of the heroin reaching the United States in 1984 arrived by commercial air (see Figure 22). Smuggling conveyances continued to differ between the three main source areas. Although commercial air was the principal mode of transportation for SWA and SEA heroin, most Mexican heroin arrived by land transportation. Commercial and non-commercial vessels have a minor to negligible role in opiate smuggling.

The primary suppliers of wholesale quantities of SWA heroin in the Northeast and Southeast in 1984 included not only traditional organized crime groups, but also Pakistanis, Lebanese, Nigerians, and Turks. Import/export companies were sometimes used as fronts for narcotics smuggling. Nigerians supplied SWA heroin to black organizations in Washington, D.C., as well as to those in smaller cities such as Durham and Greensboro, North Carolina.

The primary source of heroin in the Midwest and Southwest was Mexico; seizures of kilogram quantities were more common than in the late 1970's and early 1980's. Houston was a major transshipment point for Mexican heroin from the Durango area destined for distribution in Chicago. Lebanese, Pakistani, and Iranian nationals also controlled wholesale quantities of SWA heroin in the Midwest. Arizona was the principal Southwest point of entry for Mexican heroin, although Texas was also frequently used.

In most areas along the west coast, Mexican heroin availability and purity increased. The availability of 'black tar,' a poorly processed heroin, but sold at the street level with higher than average purity, also increased. The lowest 'black tar' purities reported were 40 percent, but most samples were of higher purity. While Mexican heroin remains the most widely used variety of heroin on the west coast, it continues to compete with SWA and SEA varieties. California was the principal point of entry for the majority of Mexican and SEA heroin entering the west coast area, but SEA heroin also entered via Hawaii and Seattle, Washington.

Figure 21

# Heroin and Morphine Use and Trafficking Indicators, 1981-1984

	1981	1982	1983	1984*
Hospital Emergencies Reported through the DAWN System	7,037	9,967	11,028	10,901
Heroin/Morphine related:				
Deaths (less New York City)	698	894	771	1,005
New York City	232	97	29	41
Retail Heroin Purity	3.9	5.0	4.5	4.7
Origin (%)**				
Southwest Asia	54	52	48	51
Mexico	36	34	33	32
Southeast Asia	10	14	19	17

## Heroin Prices (New York City)

Wholesale (per kg.) (thousands)	\$225	\$200	\$215	\$215
Retail (per 1-5 gm.)	\$50-\$60	\$45-\$60	\$45-\$60	\$45-\$65
Laboratories Seized	0	0	2	2

\*Data represent the DAWN Consistent Panel which includes only those data reported by facilities that consistently report at 90 percent or more during each year. Data representing the total DAWN System, provided in previous reports, are no longer used because of reported fluctuations. Although the Consistent Panel numbers are lower, because these facilities report consistently, they are a more accurate indicator of trends. Hospital emergencies for the years 1981 through 1983 have been revised accordingly.

\*\*Data represent the total DAWN System. The DAWN Consistent Panel data base for medical examiner reports is so small compared to the total DAWN System that it is not a valid trend indicator. DAWN medical examiner data are not subject to the same reporting inconsistencies as DAWN emergency room data. Medical examiner data for New York City, however, are incomplete after 1981.

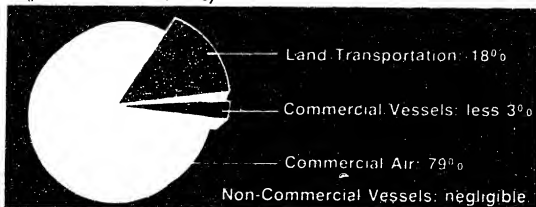
\*\*\*Percentage of total supply of source area is based on the DEA Heroin Signature Program.

Source: Project DAWN annual reports and DEA enforcement statistics.

Figure 22

## Heroin Seizures from Various Smuggling Conveyances, 1984

(percent of total volume)



### Developments in Source Countries — Southwest Asia

**Opium Production:** Estimates of illicit opium production in Southwest Asia are lower in 1984, due to the availability of better data on Afghanistan (see Figure 23). In the absence of intelligence in that regard, there is no reason to believe that Iranian opium poppy cultivation declined from the level of the past four years. Pakistani opium production, however, declined slightly. Unconfirmed reports of significant cultivation in Lebanon surfaced during 1984.

Figure 23

## Opium Production — Southwest Asia, 1981-1984

(metric tons)

	1981	1982	1983	1984
Afghanistan	225	250-300	400-575	140-180
Iran	400-600	400-600	400-600	400-600
Pakistan	75-125	50-75	45-60	40-50
Total	700-950	700-975	845-1,235	580-830

Despite the decrease in the regional opium poppy harvest in 1984, there were no indications that major opium shortages resulted. Stockpiles held in the North-West Frontier Province (NWFP) of Pakistan may have prevented large price increases. Prices for opium, however, have more than doubled compared with 1983. Whereas in 1983 a farmer received about \$30 to \$35 per kilogram, in 1984 he was paid at least \$70 for the same quantity.



The Government of Pakistan has been successful in its effort to reduce gradually the country's opium poppy cultivation. The decrease in 1984, however, was caused in part by an absence of winter rains; with sufficient water, the poppy crop could have exceeded that of 1983.

The apparently enormous reduction in the Afghan opium poppy harvest may have been due to a combination of less than ideal weather and a change in the methodology used to estimate opium poppy cultivation in Afghanistan.

In Iran, the long war with Iraq, the ongoing rebellion by the Kurdish minority, and economic stagnation prevented the government from pursuing an effective narcotics control program in 1984. In addition, the large and growing opiate addict population has likely increased demand. As a result, opium poppy cultivation probably has not decreased over the past four years.

The licit opium poppy harvest in India was 434 metric tons in 1984, lower than the expected 700 metric tons because of adverse weather conditions early in the year. If world demand remains stable, the large opium stockpile managed by the Government of India will decrease marginally. Although illicit cultivation in India is believed to be insignificant, this activity reportedly is expanding in non-traditional growing areas.

**Consumption:** Heroin use in Pakistan continued to escalate. By the end of 1984, it was estimated that there may have been 200,000 to 300,000 addicts in the country, as well as at least 300,000 opium users. Drug treatment and education programs were improved, and public awareness of the situation was heightened by greater media attention.

The number of opium addicts in Afghanistan probably remained in the 100,000 to 125,000 range, while heroin smoking reportedly increased.

Prior to the 1979 revolution in Iran there were in excess of one million opium addicts in the country, in addition to about 50,000 regular heroin smokers. While opium use may have decreased somewhat, heroin addiction has increased, particularly among the urban, unemployed youth; there probably were at least 100,000 heroin addicts in Iran by the end of 1984.

In 1984, there were an estimated three to five million individuals in India who used\* drugs diverted from licit Indian production or smuggled across the India/Pakistan border. An estimated 200 to 300 metric tons may be diverted annually from licit supplies to the

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\*Opium users in this region are of varying degree, from the occasional user to the addict.

illicit market. Heroin addiction in India, which was negligible two years ago, has become a significant problem. Drug using Afghan and Iranian refugees have increased the number of addicts within India.

**Laboratories/Refineries:** The large quantities of heroin seized in Pakistan — about two metric tons annually since 1982 — reflect continued heroin laboratory activity in the tribal areas of Pakistan and eastern Afghanistan. Pakistani authorities confiscated three operational heroin laboratories during 1984; all were located in remote areas of the Khyber Agency, NWFP. The seizure in December involved a facility larger and more sophisticated than any prior laboratory seized in Pakistan, and also included approximately 500 kilograms of partially refined heroin base.

There were numerous active heroin laboratories in eastern Afghanistan; most of their output was exported to or through Pakistan. The laboratories in southwestern Afghanistan may have been the sources for some of the heroin smuggled to Iran. Laboratory activity in Iran was believed to have been concentrated in or near the cities of Tabriz, Tehran, and Zahedan, as well as along the Iran/Turkey border.

Illicit heroin production in India continued to be minimal compared to other source areas. Most of the laboratory activity was located in north-central India, in close proximity to the licit poppy growing areas. There were reports of two new refinery areas, one in western India, and the other near the India/Nepal border.

Conversion of morphine base and opium gum in Turkey, first noted in late 1983 after a two-year lapse, continued to escalate in 1984. Four laboratories were seized in 1984, two in eastern Turkey, one in south-central Turkey, and another in Istanbul. These new laboratories were crude and the facilities were poor, but the product was a high-purity heroin. It was usually sold in multi-kilogram quantities to other Turkish traffickers who then sold it to customers in Europe. While there is no illicit production of essential chemicals in Turkey, an increasing trade in diverted acetic anhydride has developed over the past few years to meet the needs of heroin chemists both in Turkey and elsewhere in the Middle East. There is no evidence that Turkey was the primary source for the opium processed there.

In Syria, Kurdish and Armenian traffickers with transborder ties re-

mained active in the conversion of opiates to heroin during 1984, primarily in the northern border area around Aleppo and Latakia. No laboratory activity was confirmed in Lebanon during 1984; however, the civil war has virtually eliminated police action. It was likely that opiate refining continued in the Baalbek area, Tripoli, and Beirut.

**Trafficking Trends:** Pakistan remained a major heroin refining and trafficking site. Much of Afghanistan's opiate production was exported across its mostly open border with Pakistan. Iran continued to be an important outlet for both Pakistani and Afghan opiates. The proportion of these imports consumed within Iran and the amount transshipped to Turkey, Western Europe, and North America in 1984 are unknown. Since late 1982 the Persian Gulf States have been popular transit areas, in part because of their large populations of expatriate Pakistanis.

India continued to serve as both a transshipment and consumption country for much of the opiates produced in Afghanistan and Pakistan and also as a transshipment country for SEA heroin. Chemicals used in the heroin conversion process, particularly acetic anhydride, were produced in India and smuggled across the India/Burma border to SEA heroin refineries. Some heroin produced in these laboratories was smuggled back across the Burma/India border for shipment elsewhere. Drug trafficking from India by members of separatist groups increased during 1984.

The number of Nigerian nationals arrested with heroin increased significantly during 1984, and the quantity of heroin seized more than doubled. Alternative methods of operation, including the use of non-Nigerian couriers and less conspicuous routing, have evolved in response to worldwide drug law enforcement pressure.

Turkey's location between opium producing areas in Pakistan and Afghanistan and consumers in Western Europe and North America continued to make it a natural transit country for illicit narcotics. The quantities of opiates transiting Turkey were substantial. Opium gum, morphine base, and heroin were smuggled to Turkey from the east — generally from Iran but also from Iraq — and were shipped either directly west to Syria or south to Turkey's Mediterranean coast. The drugs were then moved to Western Europe and the United States. The most common route from Turkey was overland through Eastern Europe. There were indications that traffickers increasingly were shifting to sea routes via Syria, Lebanon, and southern Turkey, and then to Italy, other Western European countries, or the United States.

Syrian traffickers continued to deal primarily in heroin for central and Western Europe, and the United States. Most were from Aleppo and

Azaz, although the use of couriers from Jordan and other Arab nations has increased. All modes of commercial transportation were used. The political disruptions in Lebanon have forced traffickers to use a number of new routes. Increased heroin seizures in Damascus during 1984 indicate that traffickers continued to use the Damascus rather than the Beirut airport. Additionally, violators were using small vessels for transportation to intermediate destinations in the Mediterranean.

Heroin seizures in Europe during 1984 totaled approximately 1,500 kilograms, the same as in 1983. SWA heroin commanded approximately 80 percent of the supply in Europe. The European countries reporting the largest quantities of heroin seized during 1984 were: Italy, the United Kingdom, the FRG, France, and Belgium. The majority of Western European countries reported an increase in heroin use. While data concerning drug-related deaths and drug use in European countries are not comparable due to varied indicator systems, the data in most countries reflected increases. Over the last four years, nearly all Western European countries reported increases in drug-related deaths. Heroin overdose deaths accounted for over 90 percent of all drug fatalities. Addict population figures remained relatively constant during the same period, with the exception of Italy and Spain which reported increases.

Most of the SWA heroin in the United States entered directly from SWA source countries or was transported via Europe. Trafficking groups based primarily in Italy, France, and Spain transshipped substantial quantities of heroin from Europe to the United States in 1984. Italian organized crime elements located in those countries have direct contact with their U.S. counterparts. In many cases heroin was concealed within legitimate commercial goods transported to the United States in air or sea freight shipments. During 1984, an increase was noted in heroin trafficking by Lebanese and Syrian groups which have established operations in France and Spain. These groups were capable of smuggling multi-kilogram quantities of heroin, favoring transshipment to the United States via courier.

**Drug Control Efforts:** In 1984, the Government of Pakistan continued to improve its opium poppy crop reduction efforts. Government eradication efforts and drug law enforcement pressure against planting opium poppy in NWFP areas receiving development assistance contributed to the decline in the country's opium production to about 45 metric tons for the 1984 harvest. In September 1984, implementation of Pakistan's Special Development and Enforcement Plan, administered by the United Nations Fund for Drug Abuse Control, began in the Dir area of Pakistan's NWFP. The U.S. Department of State likewise provided assistance to the Dir area in

1984. Opium poppy eradication in the Malakand and Buner Sub-divisions and the Gadoon/Amazai region continued in 1984. Despite these efforts, there was clearly enough opium available to fuel heroin laboratories in the region, with Pakistani opium supplemented by production from Afghanistan.

The Government of Afghanistan may have been partially responsible for a drop in that country's opium poppy cultivation in 1984. This outcome, however, would have been incidental, as the government's measures were designed to destroy the food production systems in some areas controlled by guerrilla forces. Poor weather could also have been a contributing factor.

In 1984, the Iranian government was reported to have instituted severe measures, including the death penalty, against large numbers of narcotics traffickers. Since 1980 the Government of Iran has submitted reports to the United Nations of unverified enormous aggregate annual seizures of narcotics. There have been no reports of opium poppy eradication in Iran since 1980.

Turkish enforcement efforts remained effective in suppressing opium production during 1984, but that country continued to be a conduit for SWA opiates. There were some signs that Turkish enforcement efforts were stimulating a shift in trafficking routes to Syria and Lebanon, where there are virtually no controls.

## **Developments in Source Countries — Mexico**

**Opium Production:** Mexico remained a significant source for heroin during 1984. Opium poppy cultivation continued to expand, with an estimated 5,200 hectares under cultivation, a 40 percent increase over the 3,700 hectares cultivated in 1983. The Government of Mexico (GOM) reported that opium poppy eradication also increased, from 2,000 hectares destroyed in 1983 to more than 3,100 hectares in 1984. Although the heaviest concentration of opium poppy cultivation was in the traditional tri-state area of Durango, Chihuahua, and Sinaloa, poppy growth was scattered throughout the country. There is a degree of uncertainty regarding the GOM estimate of opium poppy hectareage and amount eradicated; therefore, the U.S. and Mexican Governments are planning joint survey activities in 1985 to better estimate the extent of cultivation and the effectiveness of the eradication program.

Despite eradication efforts in 1984, about 21 metric tons of opium are believed to have been produced during the year, surpassing production during each of the previous four years (see Figure 24).